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| Fill in this inform | ation to identify your case: | | | | |
|------------------------------------|--|---------------------|--------------------------|--|--|
| Debtor 1 | Heather M Wolfgang | Middle Nomes | | act Name | |
| Debtor 2 | First Name | Middle Name | L. | ast Name | |
| (Spouse if, filing |) First Name | Middle Name | L L | ast Name | |
| United States Ba | ankruptcy Court for the: NOR | RTHERN DISTRIC | T OF ILLING | DIS | |
| Case number (if known) | | | | | ☐ Check if this an amended filing |
| | | | | | amended ming |
| B 103A | a for Individuals to E | Day tha Eilii | na Eoo i | n Inetallmonts | 12/15 |
| Application | n for Individuals to F | ay the Fill | ig ree i | n installinents | 12/15 |
| Be as complete information. | and accurate as possible. If t | wo married peop | ole are filing | together, both are equally respons | ble for supplying correct |
| Part 1: Spe | ecify Your Proposed Payment | Timetable | | | |
| | pter of the Bankruptcy Code | are 🔳 | Chapter 7 | | |
| you choos | sing to file under? | | Chapter 11 | | |
| | | · | Chapter 12 Chapter 13 | | |
| 2. You may a | apply to pay the filing fee in up | _ | pose to pay | <i>I.</i> | |
| four instal propose to | Iments. Fill in the amounts you pay and the dates you plan to Be sure all dates are busines: | ou to | | See and the second of the seco | |
| | add the payments you propo | | | ☐ With the filing of the petition | , |
| to pay. | | \$ | 83.75 | On or before this date | 3/28/16 MM / DD/ YYYY |
| later than 1 | propose to pay the entire fee no 20 days after you file this | \$ | 83.75 | On or before this date | 4/25/16 |
| application | case. If the court approves you, the court will set your final | ır \$ | 83.75 | On or before this date | MM / DD/ YYYY 5/23/16 MM / DD/ YYYY |
| payment timetab | metable. | + \$ | 83.75 | On or before this date | * 6/20/16 MM / DD/ YYYY |
| | | , | | | |
| | To | s S | 335.00 | Your total must equal the entire fee for | the chapter you checked in line 1 |
| Dart 9. Sig | | , | | Tour total mast squar the share loss for | and anapter you encount in mile |
| | n Below | | | | |
| By signing here understand that | | e to pay the full t | filing fee at | once, that you want to pay the fee ir | installments, and that you |
| | | before you make | any more pa | ayments or transfer any more property | to an attorney, bankruptcy petitio |
| pre | parer, or anyone else for service | es in connection v | with your bar | nkruptcy case. | |
| | u must pay the entire fee no late ots will not be discharged until y | | | i file for bankruptcy, unless the court la | ter exterios your deadine. Tour |
| ■ / If y | ou do not make any payment w | hen it is due, you | r bankruptcy | case may be dismissed, and your right | ts in other bankruptcy proceeding |
| // ma | y be affected. | | | | |
| (Idas) | IM. Indian | / X | | | Common Co |
| Heather M | l Wolfgang | | | Law Office of Ti | mothy Brown |
| l Signature of | | Signature of | Debtor 2 | Your attorney's nar | me and signature, if you used one |
| Date ? | 1.77-16 | Date | | Date 2.21 | 16 |
| MN | 1/DD/YYYY | | DD / YYYY | MM/ DD / Y | |

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|---|---|---------------------------------|---------------------------------|-------|---|---------------------------------|
| Pill in this information Debtor 1 | tion to identify the case: Heather M Wolfga | ng | | | | |
| Debtor 2 | First Name | Middle Name | La | ast N | ame | : |
| (Spouse if, filing) | First Name | Middle Name | La | ast N | ame | |
| United States Bar | NORTHERN | DISTRICT OF IL | LIN | OIS | | |
| Case number (if k Chapter filing und | | | |] | Chapter 7 Chapter 11 Chapter 12 Chapter 13 | |
| Order Appr | oving Payment o | f Filing Fee | in Installn | nei | nts | |
| After considerii that: | ng the <i>Application for</i> | Individuals to I | Pay the Filing | ı Fe | e in Installments (Official | Form 103A), the court orders |
| ☐ The debtor(s | s) may pay the filing fe | e in installmer | nts on the terr | ms | proposed in the applicati | on. |
| ☐ The debtor(s | s) must pay the filing f | ee according t | o the followin | g te | erms: | |
| | You must pay | | On or before | thi | s date | |
| | \$ | | | | | |
| | | <u>N</u> | /lonth / day / y | yea | r | |
| | \$ | | | | | |
| | | 1 | /lonth / day / y | yea | <u> </u> | |
| | \$ | | | | | |
| | | V | /Ionth / day / y | yea | ſ | |
| + | \$ | | | | | |
| | | | /lonth / day / y | yea | r | |
| Total | \$ | | | | | |
| Until the filing f an attorney or t | ee is paid in full, the d to anyone else for sen | ebtor(s) must vices in conne | not make any ction with this | y ac | ditional payment or trans se. | sfer any additional property to |
| | Month / day / ye | B: | y the court: | Uı | nited States Bankruptcy | Judge |